Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>10-14-2010</u>	Address:	Corydon Ramsey Rd near
Case #:	<u>45-51852</u>		Hancock Chapel Rd
County:	<u>Il'arrison</u>		New Salisbury, IN
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
Chemic	onal Lab al/Glassware/Equipment (only) ite (only)	☐ Residence ☐ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Ramsey VFD	Fax: <u>N/Λ</u>	
Health Department: Harrison Co		Fax: E <u>mail</u> Fax: N/A	<u>led</u>
Child Prote	ction Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K Smith Phone 812.246.5424			

This form is to be faxed to the Pire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.